COMBINED DECLARATION FOR UTILITY OR DESIGN PATEN APPLICATION WITH POWER OF ATTORNEY			PR60317US
APPLICATION WITH		First Names Inve David Harold DI	
			Complete if I
	· 		App No.:
() Declaration submitted with initial	filing or		
() Declaration submitted after initia	filing (surcharge required 37CFR1.16(e))		Filing Date
			Group Art Ur
As below name	inventor. I hereby declare that:		<u> </u>
My residence, post office	address and citizenship are as stated below	next to my name.	
	first and sole inventor (if only one name is below) of the subject matter which is claims		
the specification of which	CHEMICAL COMPO	DUNDS	
[]is attached hereto. OR			
[X] was filed on 18 Jur	e 2004 as United States application Serial N	o or PCT Into	ernational
Application Number PC	I/US04/19692 filed and was amended on (M	IM/DD/YYYY)	(if app
	reviewed and understand the contents of the Iment specifically referred to above.	above-identified specification	n, including the c
	disclose information which is material to pa	tentability as defined in 37 C	FR §1.56.
I acknowledge the duty to) of any foreign applications	a) for motomt or
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation	efits under 35 U.S.C. §119 (a)-(d) or §365(b ny PCT international application which design I have also identified below, by checking the mal application having a filing date before the	gnated at least one country of box, any foreign application at of the application on which	her than the Unit for patent or inv
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation PRIOR FOREIGN AND ANY E	ny PCT international application which design have also identified below, by checking the mal application having a filing date before the RIORITY CLAIMS UNDER 35 U.S.C. 11	gnated at least one country of box, any foreign application at of the application on which	her than the Unit for patent or inv h priority is clair
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation PRIOR FOREIGN AND ANY F Prior Foreign Application Number (s)	ny PCT international application which design have also identified below, by checking the small application having a filing date before the	gnated at least one country of box, any foreign application hat of the application on which 19:	her than the Unit for patent or inv
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation PRIOR FOREIGN AND ANY FOREIGN APPlication Number (s) 1.	ny PCT international application which design have also identified below, by checking the mal application having a filing date before the RIORITY CLAIMS UNDER 35 U.S.C. 11	gnated at least one country of box, any foreign application at of the application on which 19: Foreign Filing Date	ther than the Unit of for patent or invited herein priority is clair PRIO
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation PRIOR FOREIGN AND ANY FOREIGN AND PRIOR FOREIGN AND ANY FOR	ny PCT international application which design have also identified below, by checking the mal application having a filing date before the RIORITY CLAIMS UNDER 35 U.S.C. 11	gnated at least one country of box, any foreign application at of the application on which 19: Foreign Filing Date	ther than the United for patent or investment of the priority is clair PRIO
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I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation. PRIOR FOREIGN AND ANY Foreign Application. Number (s) 1. 2. 3. 4. 5.	ny PCT international application which design have also identified below, by checking the mal application having a filing date before the RIORITY CLAIMS UNDER 35 U.S.C. 11 Country	gnated at least one country of box, any foreign application at of the application on which series are the application of the application on which series are the application of the application on which series are the application of the application on which series are the application of the application on which series are the application of the application on which series are the application of the application on the application of the ap	ther than the United for patent or investment of the priority is clair PRIOR CLA
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I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation. PRIOR FOREIGN AND ANY Foreign Application. Number (s) 1. 2. 3. 4. 5.	ny PCT international application which designated have also identified below, by checking the small application having a filing date before the RIORITY CLAIMS UNDER 35 U.S.C. 11 Country the 35, United States Code §119(e) of any Uring Date (M	gnated at least one country of box, any foreign application at of the application on which series are the application of the application on which series are the application of the application on which series are the application of the application on which series are the application of the application on which series are the application of the application on which series are the application of the application on the application of the ap	ther than the Unit for patent or inv h priority is clair PRIO

PR60317USw

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION O	OF PCT PARENT APPLICAT	ION				
			STATUS (Check one)			
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED		
POWER OF ATTORNEY: As a named inventor, I hereby appoint the practitioners associated with the Customer Numbers provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith Customer Number 23347 and Customer Number 20462						
Address all correspondence and telephone calls to Customer Number 23347 David J. Levy Corporate Intellectual Property GlazoSmithKline				alls to: MANOWICZ 483-8247		
Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-339	8					

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	DREWRY	David	Harold
	INVENTOR'S	Signature) M	<u> </u>	Date: A J 117 on U
	SIGNATURE	TWEN GOLD TWIN		Date: August 11, 2004
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham U	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	EVANS	Brian	<u>l</u>
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
1	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GOODMAN	Krista	В.
	INVENTOR'S	Signature		Date:
	SIGNATURE		CONTROL DO PODDICOV COVIDEDAY	GOVERNMENT OF CHARGE STATE OF THE STATE OF T
0	RESIDENCE &	CITY Vine of Possesie	STATE OR FOREIGN COUNTRY PA	COUNTRY OF CITIZENSHIP US
	CITIZENSHIP	King of Prussia	CITY	STATE & ZIP CODE/COUNTRY
١,	POST OFFICE ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
3	ADDRESS		Research Triangle Fark	North Caronna 27703, US
	2011 1 3143 4D	Five Moore Drive, PO Box 13398	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
١ ,	FULL NAME	GREEN	Darren	Victor, Steven
2	OF INVENTOR INVENTOR'S	Signature	Darren	Date:
	SIGNATURE	Signature		
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ľ	CITIZENSHIP	Stevenage	GB	GB
	POST OFFICE	POST OFFICE ADDRESS	СТТҮ	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
Ì	1 1 1	Five Moore Drive, PO Box 13398		
L	'	21.01.230.0 21, 2 0 202 10030		

CON	COMBINED DECLARATION FOR UTILITY or DESIGN ATTORNEY'S DOCKET NUMBER PR60317USW						
PAT	ENT APPLI	CATION WITH POWER	R OF ATTORNEY Co				
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL			
2	OF INVENTOR	JUNG	David	Kendall			
ĺ	INVENTOR'S	Signature		Date:			
	SIGNATURE	_					
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
ŀ	CITIZENSHIP	Durham	NC	US			
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY			
5	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US			
	1	Five Moore Drive, PO Box 13398					
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL			
2	OF INVENTOR	LEE	Dennis				
	INVENTOR'S	Signature	**************************************	Date:			
	SIGNATURE						
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
	CITIZENSHIP	King of Prussia	PA	US			
	POST OFFICE	POST OFFICE ADDRESS	СІТУ	STATE & ZIP CODE/COUNTRY			
6	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US			
		Five Moore Drive, PO Box 13398					
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL			
2	OF INVENTOR	STAVENGER	Robert	A.			
	INVENTOR'S	Signature		Date:			
	SIGNATURE						
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
	CITIZENSHIP	King of Prussia POST OFFICE ADDRESS	PA	US			
	POST OFFICE		CTTY	STATE & ZIP CODE/COUNTRY			
7	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US			
		Five Moore Drive, PO Box 13398					
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL			
2	OF INVENTOR	WADMAN	Sjoerd	Nocolaas			
	INVENTOR'S	Signature		Date:			
<i>'</i>	SIGNATURE						
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP			
	CITIZENSHIP	Obermorschwiller	FR	NL			
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY			
8	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US			
		Five Moore Drive, PO Box 13398					

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COMBINED DECLAI APPLICATION WITH () Declaration submitted with initial () Declaration submitted after initia	H POWER	OF ATTORNEY		PR603 First Nan David Ha		
					Art Unit:	
As below name	d inventor. I here	by declare that:				
My residence, post office	address and citiz	zenship are as stated belo	ow next to my name.			
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
: CHEMICAL COMPOUNDS the specification of which (check only one item below):						
[]is attached hereto. OR						
-	e 2004 as United	d States application Seria	al No or PCT Inte	rnational		
Application Number PC	<u>T/US04/19692</u> fi	iled and was amended or	ı (MM/DD/YYYY)		(if applicable)	
I hereby state that I have as amended by any amen			the above-identified specification	, includin	g the claims,	
I acknowledge the duty to	disclose informa	ation which is material to	patentability as defined in 37 Cl	FR §1.56.		
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation PRIOR FOREIGN AND ANY P	any PCT internati d have also ident onal application h	onal application which of ified below, by checking naving a filing date before	lesignated at least one country of the box, any foreign application to that of the application on which	her than the	ne United or inventor's	
Prior Foreign Application		Country	Foreign Filing Date		PRIORITY	
Number (s)	`	Soundy	(MM/DD/YYYY))		CLAIMED	
1.						
2.						
3.						
4.						
5.						
I hereby claim the benefit under T	itle 35, United St	ates Code §119(e) of any	y United States provisional applic	cation(s) l	isted below:	
Application No.			(MM/DD/YYYY)			
1. 60/479,753	· ·	00	5/19/2003			
3.						

ATTORNEY'S DOCKET NUMBER
PR60317USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION of	<u>r PCT PARENT APPLICAT</u>	ION			
			STATUS (Check one)		
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED	
POWER OF ATTORNEY: As a named invented prosecute this application and to transact all busing Customer Number 23347 and Customer Number 23347.	ness in the Patent and Trademark (provided below to	
Address all correspondence and telephone calls to Customer Number 23347 David J. Levy Corporate Intellectual Property GlaxoSmithKline Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-3398				alls to: MANOWICZ 483-8247	

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	DREWRY	David	Harold
	INVENTOR'S	Signature		Date:
	SIGNATURE	<u></u>		
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	EVANS	Brian	
1	INVENTOR'S	Signature O		Date:
1	SIGNATURE	Signature Bran Evan		17-8-04
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GOODMAN	Krista	В.
l	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	<u> </u>	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GREEN	Darren	Victor, Steven
	INVENTOR'S	Signature		Date:
	SIGNATURE			
. 0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		

ATTORNEY'S DOCKET NUMBER COMBINED DECLARATION FOR UTILITY or DESIGN PR60317USw PATENT APPLICATION WITH POWER OF ATTORNEY Continued FIRST GIVEN NAME FAMILY NAME FULL NAME SECOND GIVEN NAME/INITIAL **JUNG** OF INVENTOR David Kendall **INVENTOR'S** Signature Date: SIGNATURE CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP ٥ RESIDENCE & NC Durham CITIZENSHIP US POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY POST OFFICE GlaxoSmithKline Research Triangle Park 5 **ADDRESS** North Carolina 27709, US Five Moore Drive, PO Box 13398 FIRST GIVEN NAME FULL NAME SECOND GIVEN NAME/INITIAL 2 OF INVENTOR LEE David **INVENTOR'S SIGNATURE** 0 STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP RESIDENCE & King of Prussia CITIZENSHIP POST OFFICE ADDRESS POST OFFICE CITY STATE & ZIP CODE/COUNTRY GlaxoSmithKline North Carolina 27709, US 6 ADDRESS Research Triangle Park Five Moore Drive, PO Box 13398 FULL NAME FIRST GIVEN NAME FAMILY NAME SECOND GIVEN NAME/INITIAL **STAVENGER** OF INVENTOR Robert A. INVENTOR'S Signature Date: SIGNATURE 0 RESIDENCE & CITY STATE OR FOREIGN COUNTRY COUNTRY OF CITIZENSHIP King of Prussia PA CITIZENSHIP US POST OFFICE POST OFFICE ADDRESS CITY STATE & ZIP CODE/COUNTRY 7 GlaxoSmithKline Research Triangle Park **ADDRESS** North Carolina 27709, US Five Moore Drive, PO Box 13398 FIRST GIVEN NAME SECOND GIVEN NAME/INITIAL FULL NAME FAMILY NAME OF INVENTOR 2 WADMAN Sjoerd **Nocolaas INVENTOR'S** Signature Date: SIGNATURE STATE OR FOREIGN COUNTRY 0 RESIDENCE & COUNTRY OF CITIZENSHIP Obermorschwiller CITIZENSHIP FR POST OFFICE ADDRESS STATE & ZIP CODE/COUNTRY POST OFFICE 8 GlaxoSmithKline Research Triangle Park North Carolina 27709, US **ADDRESS** Five Moore Drive, PO Box 13398

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY					NEY'S DOCKET	
APPLICATION WITH	H POWER	OF ATTORNE	Y	1	imes Inventor: Farold DREWRY	
() Declaration submitted with initial	l filing or				lete if known:	
() Declaration submitted after initia	al filing (surcharge	required 37CFR1.16(e))		Filing	Date	
				Group	Art Unit:	
As below name	d inventor. I her	eby declare that:				
My residence, post office	e address and citi	izenship are as stated bel	ow next to my name.			
I believe I am the origina (if plural names are listed entitled:	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:					
the specification of which	CHEMICAL COMPOUNDS the specification of which (check only one item below):					
[]is attached hereto. OR	;					
[X] was filed on 18 Jun	ne 2004 as Unite	d States application Seri	al No or PCT Int	ernational	I	
Application Number PC	T/US04/19692 f	iled and was amended or	n (MM/DD/YYYY)	<u> </u>	_(if applicable)	
I hereby state that I have as amended by any amen	reviewed and un dment specifical	derstand the contents of ly referred to above.	the above-identified specification	ı, includir	ng the claims,	
I acknowledge the duty to	o disclose inform	ation which is material t	o patentability as defined in 37 C	FR §1.56	•	
I hereby claim foreign priority ber inventor's certificate or 365(a) of a States of America, listed below an certificate or of any PCT internation	any PCT internated have also ident on all application I	ional application which on the control of the contr	designated at least one country of the box, any foreign application to that of the application on which	her than to	he United it or inventor's	
PRIOR FOREIGN AND ANY P						
Number (s)		Country	Foreign Filing Date (MM/DD/YYYY))		PRIORITY CLAIMED	
1.		·				
2. 3.						
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5.						
I hereby claim the benefit under T	itle 35, United St	ates Code §119(e) of an	y United States provisional applie	cation(s)	isted below:	
Application No.			(MM/DD/YYYY)			
1. 60/479,753			6/19/2003			
2.						

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PRIOR U.S. PARENT APPLICATION or PCT PARENT APPLICATION

Research Triangle Park, NC 27709-3398

ATTORNEY'S DOCKET NUMBER
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			STATUS (Check	one)
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED
POWER OF ATTORNEY: As a named inver prosecute this application and to transact all bus Customer Number 23347 and Customer Number	siness in the Patent and Trademark			provided below to
Address all correspondence and telephone		347	Direct Telephone Ca	alls to:
David J. Levy Corporate Intellectual Property GlaxoSmithKline Five Moore Drive, PO Box 13398		,		MANOWICZ 483-8247

1	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	DREWRY	David	Harold
	INVENTOR'S	Signature		Date:
ļ	SIGNATURE	ĺ		
0	RESIDENCE &	СТТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	_	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	EVANS	Brian	
1	INVENTOR'S	Signature		Date:
ł	SIGNATURE			
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
l	CITIZENSHIP	Stevenage	GB	GB
}	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	1	· ·
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GOODMAN 🔿	Krista	В.
	INVENTOR'S	Signature		Date:
	SIGNATURE	Ø1)		7/30/04
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ŀ	CITIZENSHIP	King of Prussia	PA	US
	POST OFFICE	POST OFFICE ADDRESS	спу	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	·	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GREEN	Darren	Victor, Steven
	INVENTOR'S	Signature		Date:
l	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
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4	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		

		CCLARATION FOR UTILICATION WITH POWER		ATTORNEY'S BOCKET NUMBER PR60317USw ontinued
_	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	JUNG	David	Kendall
	INVENTOR'S	Signature		Date:
0	SIGNATURE	CITY	I STATE OF FOREIGN GOVERNMENT	
U	RESIDENCE & CITIZENSHIP	Durham	STATE OR FOREIGN COUNTRY NC	COUNTRY OF CITIZENSHIP
	POST OFFICE	POST OFFICE ADDRESS	CITY	US
5	ADDRESS	GlaxoSmithKline	Research Triangle Park	STATE & ZIP CODE/COUNTRY
3	ADDRESS		Research Triangle Park	North Carolina 27709, US
	FULL MANCE	Five Moore Drive, PO Box 13398		
2	FULL NAME		FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
	OF INVENTOR	LEE	Dennis	
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
_	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
6	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	STAVENGER	Robert	A.
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia POST OFFICE ADDRESS	PA	US
_	POST OFFICE		СПУ	STATE & ZIP CODE/COUNTRY
7	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		1
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	WADMAN	Sjoerd	Nocolaas
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Obermorschwiller	FR	NL
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
8	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		1

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	APPLICATION WITE	T DAWED C				317USw
		H PUWEK C	DF ATTUKNE	Y		mes Inventor: Iarold DREWRY
						lete if known:
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	() Declaration submitted with initial	filing or				
	() Declaration submitted after initial	l filing (surchar ge re	quired 37CFR1.16(e))		Filing	Date
					Group	Art Unit:
					<u></u>	
	As below named	d inventor. I her eb	by declare that:			
	My residence, post office	e address and citize	enship are as stated bel	ow next to my name.		
				ne is listed below) or an original, aimed and for which a patent is s		
			CHEMICAL CON	IPOUNDS		
	the specification of which	h (check only on e	item below):			
	[]is attached hereto.					
	T = -	e 2004 as United S	States application Seria	al No or PCT Inte	rnational	
	Application Number <u>PC'</u> applicable)	T/US04/19692 fil	led and was amended o	on (MM/DD/YYYY)		_(if
	I hereby state that I have as amended by any amended			the above-identified specification	n, includi	ng the claims,
	I acknowledge the duty to	o disclose informat	tion which is material	to patentability as defined in 37 C	FR §1.56	5.
	I hereby claim foreign priority ben inventor's certificate or 365(a) of a States of America, listed below and certificate or of any PCT internation	nny PCT internation d have also identif	nal application which ied below, by checking	designated at least one country of gthe box, any foreign application	her than to for pater	the United nt or inventor's
	PRIOR FOREIGN AND ANY P					
	Prior Foreign Application Number (s)	Co	ountry	Foreign Filing Date (MM/DD/YYYY))		PRIORITY CLAIMED
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ŀ	5.					
ŀ	I hereby claim the benefit under Ti	itle 35. United Stat	tes Code §119(e) of an	v United States provisional appli	cation(s)	listed below:
ŀ	Application No.			(MM/DD/YYYY)	(-)	
İ	1. 60/479,753			6/19/2003		
ľ	2.					

PRIOR U.S. PARENT APPLICATION or PCT PARENT APPLICATION

PR60317USw

STATUS (Check one)

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED
POWER OF ATTORNEY: As a named inven prosecute this application and to transact all busicustomer Number 23347 and Customer Number	iness in the Patent and Trademark			provided below to
Address all correspondence and telephone of	calls to Customer Number 23.	347	Direct Telephone Ca	alls to:
David J. Levy			Robert	J. SMITH
Corporate Intellectual Property GlaxoSmithKline		483-8022		
Five Moore Drive, PO Box 13398				
Research Triangle Park, NC 27709-3398	8			

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SIGNATURE CITY	2	OF INVENTOR	DREWRY	David	Harold
RESIDENCE & CITY STATE OR FOREIGN COUNTRY NC	İ	INVENTOR'S	Signature	Date:	
CITIZENSHIP Durham NC		SIGNATURE			
POST OFFICE ADDRESS GIAXOSMITHKIINE FIVE MOORE DRIVE, PO Box 13398 FULL NAME OF INVENTOR'S SIGNATURE OR RESIDENCE & CITY COLOR DRIVE, PO Box 13398 FULL NAME OF INVENTOR'S SIGNATURE OR RESIDENCE & CITY COLOR DRIVE, PO Box 13398 FULL NAME OF INVENTOR'S SIGNATURE OF INVENTOR'S SIGNATURE OR RESIDENCE & CITY COLOR DRIVE, PO Box 13398 FULL NAME OF INVENTOR'S SIGNATURE OR RESIDENCE & CITY COLOR DRIVE, PO Box 13398 FULL NAME OF INVENTOR'S SIGNATURE OR RESIDENCE & CITY STATE OR FOREIGN COUNTRY COLOR TOWN AMEAINITIAL B. OF INVENTOR'S SIGNATURE OR RESIDENCE & CITY STATE OR FOREIGN COUNTRY COLOR TOWN AMEAINITIAL B. OR RESIDENCE & CITY STATE OR FOREIGN COUNTRY COLOR TOWN AMEAINITIAL B. OR RESIDENCE & CITY STATE OR FOREIGN COUNTRY COLOR TOWN AMEAINITIAL B. OR RESIDENCE & CITY STATE OR FOREIGN COUNTRY COLOR TOWN OF CITIZENSHIP COLOR TOWN AMEAINITIAL B. OR RESIDENCE & CITY STATE OR FOREIGN COUNTRY COLOR TOWN OF CITIZENSHIP COLOR TOWN AMEAINITIAL COLOR TOWN OF CITIZENSHIP COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN OF CITIZENSHIP COLOR TOWN TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAINITIAL COLOR TOWN AMEAI	0	RESIDENCE &			
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	4	ADDRESS		Research Friangle Park	Inor in Carolina 27/09, US
		<u></u>	Five Moore Drive, PO Box 13398		

PAT		ICATION WITH POWE		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	JUNG	David	Kendall
	INVENTOR'S SIGNATURE	Signature		Date:
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
5	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, U
_		Five Moore Drive, PO Box 13398		2,705,
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	LEE	Dennis	
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
6	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, U
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	STAVENGER	Robert	A
	INVENTOR'S	Signature		Date:
0	SIGNATURE RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
U	CITIZENSHIP	King of Prussia	PA	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
7	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, U
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	WADMAN	Sjoerd	Nocolaas
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
}	CITIZENSHIP	Obermorschwiller	FR	NL
	POST OFFICE	POST OFFICE ADDRESS GlaxoSmithKline	CITY Describe Trionals Ports	STATE & ZIP CODE/COUNTRY
8	ADDRESS		Research Triangle Park	North Carolina 27709, U
		Five Moore Drive, PO Box 13398		<u> </u>
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COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY					EY'S DOCKET		
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() Declaration submitted with initial fi	ling or				e if known:		
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() Declaration submitted after initial f	iling (surcharge	required 37CFR1.16(e))	•	Filing Da	ate		
				Group A	rt Unit:		
As below named i	As below named inventor. I hereby declare that:						
My residence, post office a	ddress and citiz	zenship are as stated bel	ow next to my name.				
			e is listed below) or an original, a simed and for which a patent is so				
the specification of which (check only one	CHEMICAL COM titem below):	1POUNDS				
[]is attached hereto. OR	:						
[X] was filed on 18 June	2004 as United	d States application Seri	al No or PCT Into	ernational			
Application Number PCT	/US04/19692 f	iled and was amended or	n (MM/DD/YYYY)	(i	if applicable)		
I hereby state that I have re as amended by any amendr			the above-identified specification	n, including	the claims,		
I acknowledge the duty to o	disclose inform	ation which is material to	o patentability as defined in 37 C	FR §1.56.			
I hereby claim foreign priority benef inventor's certificate or 365(a) of an States of America, listed below and certificate or of any PCT internation	y PCT internati have also ident al application l	onal application which of ified below, by checking naving a filing date before	designated at least one country of the box, any foreign application to that of the application on which	her than the for patent o	United or inventor's		
PRIOR FOREIGN AND ANY PR	IORITY CLA	IMS UNDER 35 U.S.C					
Prior Foreign Application Number (s)		Country	Foreign Filing Date (MM/DD/YYYY))		PRIORITY CLAIMED		
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Application No.	e 33, Omieu Si		e (MM/DD/YYYY)	Cation(S) IIS	ied below:		
1. 60/479,753			6/19/2003				
2.							



ATTORNEY'S DOCKET NUMBER
PR60317USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION	or PCT PARENT APPLICAT	ION		
			STATUS (Check	one)
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED
POWER OF ATTORNEY: As a named inventor prosecute this application and to transact all bus Customer Number 23347 and Customer Number 23347.	iness in the Patent and Trademark			provided below to
Address all correspondence and telephone	calls to Customer Number 23:	347	Direct Telephone Ca	alls to:
David J. Levy Corporate Intellectual Property GlaxoSmithKline Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-3398				MANOWICZ 483-8247

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	DREWRY	David	Harold
_	INVENTOR'S	Signature		Date:
	SIGNATURE			i I
0	RESIDENCE &	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	СГГҮ	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		<u> </u>
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	EVANS	Brian	
	INVENTOR'S	Signature		Date:
	SIGNATURE			·
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GOODMAN	Krista	В.
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	CITY	US STATE & ZIP CODE/COUNTRY
_	POST OFFICE	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
3	ADDRESS		Research Triangle Fark	North Caronna 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GREEN	Darren	Victor, Steven
	INVENTOR'S	Signature		Date:
_	SIGNATURE	Otto	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
0	RESIDENCE &	CITY	GB	GB
	CITIZENSHIP	Stevenage POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
	POST OFFICE	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
4	ADDRESS		Acceptant I naugic I al K	Troitin Caronna 2/107, US
		Five Moore Drive, PO Box 13398	<u> </u>	<u> </u>

CON	ABINED DE	CLARATION FOR UTII	LITY or DESIGN	ATTORNEY'S DOCKET NUMBER PR60317USW
PAT	ENT APPL	ICATION WITH POWER	R OF ATTORNEY Con	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	JUNG	David	Kendall
	INVENTOR'S SIGNATURE	Signature K.		Date: august 2, 2004
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	crry	STATE & ZIP CODE/COUNTRY
5	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	LEE	Dennis	
	INVENTOR'S	Signature		Date:
	SIGNATURE			[
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
6	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	1	<u> </u>
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	STAVENGER	Robert	A.
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
7	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	WADMAN	Sjoerd	Nocolaas
	INVENTOR'S	Signature	*	Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Obermorschwiller	FR	NL
	POST OFFICE	POST OFFICE ADDRESS	СТТҮ	STATE & ZIP CODE/COUNTRY
8	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	_	

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COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY ATTORNEY'S PR60317U First Names Inv					IEY'S DOCKET 17USw	
APPLICATION WITE	i POWEK (OF ALTORNEY			nes Inventor: rold DREWRY	
				Comple	ete if known:	
(A) Design of the form of the light to take to	G1:			App No).:	
() Declaration submitted with initial	ning or				-	
() Declaration submitted after initial	filing (surcharge r	equired 37CFR1.16(e))		Filing I	Date	
				Group	Art Unit:	
	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
As below named	As below named inventor. I hereby declare that:					
My residence, post office	address and citiz	zenship are as stated belo	ow next to my name.		:	
			e is listed below) or an original, in the simed and for which a patent is so			
the specification of which	ı (check only one	CHEMICAL COMittem below):	IPOUNDS			
[]is attached hereto.	;					
* = -	e 2004 as United	1 States application Serie	al No or PCT Into	ernational		
Application Number PC	T/US04/19692 fi	led and was amended or	ı (MM/DD/YYYY)		(if applicable)	
I hereby state that I have as amended by any amended			the above-identified specification	n, includin	g the claims,	
I acknowledge the duty to	disclose informa	ation which is material to	p patentability as defined in 37 C	FR §1.56.		
I hereby claim foreign priority ben inventor's certificate or 365(a) of a States of America, listed below and certificate or of any PCT internation.	my PCT internati d have also ident onal application h	onal application which of ified below, by checking laving a filing date before	lesignated at least one country of the box, any foreign application to that of the application on which	her than the	ne United or inventor's	
PRIOR FOREIGN AND ANY P		IMS UNDER 35 U.S.C Country	Foreign Filing Date		PRIORITY	
Number (s)		Sound y	(MM/DD/YYYY))		CLAIMED	
1.						
2. 3.						
4.	<u> </u>					
5.						
I hereby claim the benefit under Ti	itle 35, United St	ates Code §119(e) of an	y United States provisional appli	cation(s) I	isted below:	
Application No.			(MM/DD/YYYY)			
1. 60/479,753		00	6/19/2003			
2.						

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ATTORNEY'S DOCKET NUMBER
PR60317USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION O	or PCT PARENT APPLICAT	TION			
			STATUS (Check	heck one)	
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED	
POWER OF ATTORNEY: As a named inven prosecute this application and to transact all bus Customer Number 23347 and Customer Number	iness in the Patent and Trademark			provided below to	
Customer Number 23347 and Customer Number 20462 Address all correspondence and telephone calls to Customer Number 23347 David J. Levy Corporate Intellectual Property GlaxoSmithKline Five Moore Drive, PO Box 13398 Percent Principle Park, NC 27709 3398		347		alls to: MANOWICZ 483-8247	

	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	DREWRY	David	Harold
1 ~	INVENTOR'S	Signature		Date:
İ	SIGNATURE			
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ľ	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
1		Five Moore Drive, PO Box 13398	9	1
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	EVANS	Brian	
	INVENTOR'S	Signature		Date:
l	SIGNATURE	<u></u>		
0	RESIDENCE &	CTTY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
l	CITIZENSHIP	Stevenage	GB ′	GB
l	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	<u></u>	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GOODMAN	Krista	B.
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
_	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GREEN	Darren	Victor, Steven
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
l · .	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
	<u> </u>	Five Moore Drive, PO Box 13398		

COM	COMBINED DECLARATION FOR UTILITY or DESIGN ATTORNEY'S DOCKET NUMBER PR60317USW							
PAT	PATENT APPLICATION WITH POWER OF ATTORNEY Continued							
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL				
2	OF INVENTOR	JUNG	David	Kendall				
Ī	INVENTOR'S	Signature		Date:				
i i	SIGNATURE							
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP				
	CITIZENSHIP	Durham	NC	US				
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY				
5	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US				
1		Five Moore Drive, PO Box 13398						
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL				
2	OF INVENTOR	LEE	Dennis					
	INVENTOR'S	Signature		Date: Aug 9,2004				
	SIGNATURE							
0	RESIDENCE &	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP				
	CITIZENSHIP	King of Prussia	PA	US				
1	POST OFFICE	POST OFFICE ADDRESS	СПҮ	STATE & ZIP CODE/COUNTRY				
6	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US				
		Five Moore Drive, PO Box 13398						
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL				
2	OF INVENTOR	STAVENGER	Robert	A.				
	INVENTOR'S	Signature		Date:				
	SIGNATURE							
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP				
	CITIZENSHIP	King of Prussia POST OFFICE ADDRESS	PA	US				
	POST OFFICE		СПУ	STATE & ZIP CODE/COUNTRY				
7	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US				
		Five Moore Drive, PO Box 13398						
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL				
2	OF INVENTOR	WADMAN	Sjoerd	Nocolaas				
Ī	INVENTOR'S	Signature		Date:				
	SIGNATURE		CT - TT OR FOREIGN GOVERNMENT					
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP				
ł	CITIZENSHIP	Obermorschwiller	FR	NL				
	POST OFFICE	POST OFFICE ADDRESS	CITY Decemble Triangle Book	STATE & ZIP CODE/COUNTRY				
8	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US				
		Five Moore Drive, PO Box 13398	l					

COMBINED DECLAR APPLICATION WITH	I POWER (ATTORNEY'S DOCKET PR60317USw First Names Inventor: David Harold DREWRY Complete if known: App No.:		
		' 27CER1 1((-))		Filing Date		
() Declaration submitted after initial	filing (surcharge r	equired 3/CFR1.10(e))				
·				Group Art Unit:		
As below named inventor. I hereby declare that:						
My residence, post office	address and citiz	zenship are as stated belo	ow next to my name.			
			e is listed below) or an original, the same of the sam			
the specification of which	(check only one	CHEMICAL COMe item below):	IPOUNDS			
[]is attached hereto. OR [X] was filed on 18 Jun	; e 2004 as United	d States application Seri	al No or PCT Into	ernational		
Application Number <u>PC</u>	<u>1/US04/19692</u> fi	iled and was amended or	n (MM/DD/YYYY)	(if applicable)		
I hereby state that I have a as amended by any amended			the above-identified specification	n, including the claims,		
I acknowledge the duty to	disclose inform	ation which is material t	o patentability as defined in 37 C	FR §1.56.		
I hereby claim foreign priority ben inventor's certificate or 365(a) of a States of America, listed below and certificate or of any PCT internation	ny PCT internati d have also ident onal application h	ional application which of ified below, by checking having a filing date befo	designated at least one country of g the box, any foreign application re that of the application on whic	her than the United for patent or inventor's		
PRIOR FOREIGN AND ANY P				DD (OD WO)		
Prior Foreign Application Number (s)	•	Country	Foreign Filing Date (MM/DD/YYYY))	PRIORITY CLAIMED		
1.						
2.						
4.	3.					
5.						
I hereby claim the benefit under Ti	tle 35, United St	tates Code §119(e) of an	y United States provisional appli	cation(s) listed below:		
Application No.			e (MM/DD/YYYY)			
1. 60/479,753		0	6/19/2003			
2. 3.						
الم		<u>L </u>	· · · · · · · · · · · · · · · · · · ·			

ATTORNEY'S DOCKET NUMBER
PR60317USW

I hereby claim the benefit under 35, U.S.C. §120 of any United States application or §365(c) of any PCT international application designating the United States of America that is listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. PARENT APPLICATION	or PCT PARENT APPLICAT	ION		
		STATUS (Check one)		
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED
POWER OF ATTORNEY: As a named inventor prosecute this application and to transact all bust Customer Number 23347 and Customer Number	siness in the Patent and Trademark	ers associated with the Office connected therev	Customer Numbers with	provided below to
Address all correspondence and telephone of David J. Levy Corporate Intellectual Property GlaxoSmithKline Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-339		<u>347</u>		alls to: MANOWICZ 483-8247

1	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	DREWRY	David	Harold
l	INVENTOR'S	Signature		Date:
	SIGNATURE	1.		
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ļ	CITIZENSHIP	Durham	NC	US
	POST OFFICE	POST OFFICE ADDRESS	СПУ	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		North Caronna 27709, US
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	EVANS	Brian	SECOND GIVEN NAME/INITIAL
i	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398	1	1 to 1 to 1 to 1 to 1 to 1 to 1 to 1 to
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GOODMAN	Krista	B.
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
_	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		1 2
_	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GREEN	Darren	Victor, Steven
	INVENTOR'S	Signature		Date:
	SIGNATURE			1
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
- 1	CITIZENSHIP	Stevenage	GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
	_	Five Moore Drive, PO Box 13398	3	2,700,00

COM	IBINED DE	CLARATION FOR UTIL	LITY or DESIGN	ATTORNEY'S DOCKET NUMBER PR60317USw
PAT	ENT APPLI	ICATION WITH POWER	OF ATTORNEY Cont	inued
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	JUNG	David	Kendall
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	СІТҮ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
}	CITIZENSHIP	Durham	NC .	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
5	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
· ·	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	LEE -	Dennis	
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
_	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
6	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	STAVENGER	Robert	A.
	INVENTOR'S	Signature		7/30/2014
	SIGNATURE	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
0	RESIDENCE &	King of Prussia	PA	US
	CITIZENSHIP	POST OFFICE ADDRESS	CITY	
7	POST OFFICE ADDRESS	GlaxoSmithKline	Research Triangle Park	STATE & ZIP CODE/COUNTRY
′	ADDKESS	Five Moore Drive, PO Box 13398	Research Friangle Park	North Carolina 27709, US
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	WADMAN	Sjoerd	Nocolaas
	INVENTOR'S	Signature	1. 17 9 7 7 7 7	Date:
1	SIGNATURE			
0	RESIDENCE &	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Obermorschwiller	FR	NL NL
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
g.			North Carolina 27709, US	
	ADDRESS	Giaxosinunxine	i Kacaicu ilianek laik - 1	1101 th Calonna 27 /02. Un

COMBINED DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION WITH POWER OF ATTORNEY				ATTORNEY'S DOCKE PR60317USw First Names Inventor: David Harold DREWRY	
				Complex App No	<u>te if known:</u> .:
() Declaration submitted with initial	l filing or				
() Declaration submitted after initial	al filing (surcharge	required 37CFR1.16(e))		Filing D	ate
				Group A	Art Unit:
As below name	ed inventor. I here	eby declare that:			
My residence, post offic	e address and citi	zenship are as stated bel	low next to my name.		
I believe I am the origina (if plural names are listed entitled:	al, first and sole in d below) of the su	nventor (if only one namubject matter which is cl	ne is listed below) or an original, laimed and for which a patent is s	first and jo sought on th	int inventor he invention
the specification of whic	ch (check only on	CHEMICAL COM te item below):	APOUNDS .		
[]is attached hereto. OR	, ,				
Application Number PC			ial No or PCT Inte		(if
applicable)					(11
I hereby state that I have as amended by any amen	reviewed and und adment specifical	derstand the contents of ly referred to above.	the above-identified specification	n, includin	g the claims,
I acknowledge the duty t	o disclose inform	nation which is material t	to patentability as defined in 37 C	CFR §1.56.	
I hereby claim foreign priority ber inventor's certificate or 365(a) of States of America, listed below an certificate or of any PCT internati	any PCT internati nd have also ident ional application h	tional application which on tified below, by checking having a filing date befor	designated at least one country of g the box, any foreign application are that of the application on whice	ther than th	e United
PRIOR FOREIGN AND ANY I Prior Foreign Application					
Number (s)		Country	Foreign Filing Date (MM/DD/YYYY))		PRIORITY CLAIMED
1. 2.					
3.					
4.	 				
4. 5.					
I hereby claim the benefit under T	itle 35, United St	tates Code §119(e) of an	v United States provisional appli	cation(s) li	sted below:
Application No.			(MM/DD/YYYY)		
1. 60/479,753		00	6/19/2003	:	
2.			<u> </u>		

ATTORNEY'S DOCKET NUMBER PR60317USW

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PRIOR U.S. PARENT APPLICATION	or PCT PARENT APPLICAT	ΓΙΟΝ		
				one)
U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	PATENTED	PENDING	ABANDONED
POWER OF ATTORNEY: As a named inventor prosecute this application and to transact all bus Customer Number 23347 and Customer Number 23347.	iness in the Patent and Trademark	ers associated with the Office connected therev	Customer Numbers with	provided below to
Address all correspondence and telephone of David J. Levy Corporate Intellectual Property GlaxoSmithKline Five Moore Drive, PO Box 13398 Research Triangle Park, NC 27709-3398		<u>347</u>		alls to: MANOWICZ 483-8247

	PUTT A MANCE	FAMILY NAME	Toron Current vision	
	FULL NAME		FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	DREWRY	David	Harold
	INVENTOR'S	Signature		Date:
1 .	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
ŀ	CITIZENSHIP	Durham	NC	US
l .	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
1	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
	<u> </u>	Five Moore Drive, PO Box 13398	l .	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	EVANS	Brian	1
	INVENTOR'S	Signature		Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
2	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GOODMAN	Krista	В.
	INVENTOR'S	Signature		Date:
i	SIGNATURE		÷	
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	King of Prussia	PA	US
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
3	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
		Five Moore Drive, PO Box 13398		2,70,00
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/INITIAL
2	OF INVENTOR	GREEN	Darren	Victor, Steven
] ~	INVENTOR'S	Signature	Pariell	Date:
	SIGNATURE			
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	CITIZENSHIP	Stevenage	GB	GB
1	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
4	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 27709, US
'	11001100		I TOSCAICH I HANGIC I AIR	1101th Caronna 27703, US
L		Five Moore Drive, PO Box 13398		

		CLARATION FOR UTIL		ATTORNEY'S DOCT	KET NUMBER
PAT	ENT APPL	ICATION WITH POWEI	R OF ATTORNEY CO	ntinued	
	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/IN	ITIAL
2	OF INVENTOR	JUNG	David	Kendall	
	INVENTOR'S	Signature		Date:	
	SIGNATURE				
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSH	IIP
	CITIZENSHIP	Durham	NC	US	
	POST OFFICE	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUR	
5	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 2	7709, US
		Five Moore Drive, PO Box 13398		<u>.l</u>	
_	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/IN	ITIAL
2	OF INVENTOR	LEE	Dennis		
	INVENTOR'S	Signature		Date:	
	SIGNATURE			İ	
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSH	IP
	CITIZENSHIP	King of Prussia	PA	US	
_	POST OFFICE	POST OFFICE ADDRESS	СІТУ	STATE & ZIP CODE/COUNTRY North Carolina 27709, US	
6	ADDRESS	GlaxoSmithKline	Research Triangle Park		
		Five Moore Drive, PO Box 13398			
_	FULL NAME	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME/IN	ITIAL
2	OF INVENTOR	STAVENGER	Robert	Α.	
	INVENTOR'S	Signature		Date:	
_	SIGNATURE				
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSH	IP
	CITIZENSHIP	King of Prussia POST OFFICE ADDRESS	CITY	US	
7	POST OFFICE ADDRESS	GlaxoSmithKline		STATE & ZIP CODE/COUN	
,	ADDRESS	Five Moore Drive, PO Box 13398	Research Triangle Park	North Carolina 2	7709, US
	FULL NAME	FAMILY NAME	TIPOT CIVIDA ALACE		
2	OF INVENTOR	WADMAN	FIRST GIVEN NAME Sjoerd	SECOND GIVEN NAME/INITIAL	
	INVENTOR'S		Sjueru	Nocolaas	
	SIGNATURE	Signature S. Wad		Date: 06/08/00	4
0	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSH	IP
	CITIZENSHIP	Obermorschwiller	FR	NL	
	POST OFFICE	POST OFFICE ADDRESS	СІТУ	STATE & ZIP CODE/COUN	
8	ADDRESS	GlaxoSmithKline	Research Triangle Park	North Carolina 2	7709, US
		Five Moore Drive, PO Box 13398			

Doc Code:

PTO/SB/81 (04-05)

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POWER OF ATTORNEY and **CORRESPONDENCE ADDRESS** INDICATION FORM

Application Number	To be assigned	1
Filing Date	Concurrently Herewith	
First Named Inventor	David Harold DREWRY	
Title	CHEMICAL COMPOUNDS	
Art Unit	To be assigned	_
Examiner Name	To be assigned	_
Attorney Docket Number	PR60317USW	7

I here	eby revoke all p	previous powers of attorney given in the	above-ider	ntified application	on.		
I here	I hereby appoint:						
\boxtimes	Practitioners associated with the Customer Number:		er:	23347			
	OR		L				
	Practitione	r(s) named below:					
		Name		Registra	ation Numbe	er	
						-	
as m	y/our attorney(s	s) or agent(s) to prosecute the application	n identifie	d above, and to	transact all	business in the	
Unite	d States Paten	nt and Trademark Office connected there	ewith.				
Ple	ase recognize	or change the correspondence address	for the abo	ve-identified ap	oplication to	:	
		associated with the above-mentioned C	Sustomer N	umber:			
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<u> </u>		associated with Customer Number:					
	OR Firm or						
Addre	Individual Name	9					
City			State		Zip		
Count							
Telep			Emai				
l am							
	Applicant/Invent	tor.					
×		ord of the entire interest. See 37 CFR 3.71. r 37 CFR 3.73(b) is enclosed. (Form PTO/SE	3/96).				
		SIGNATURE of Applic	ant or As	signee of Reco	ord		
Signa	ture	full P. Gussly			Date	December 13, 2005	
Name		Frank P. Grassler			Telephone	(919) 483-2482	
	ind Company	Attorney for SmithKline Beecham Corpo					
NOTE multip		all the inventors or assignees of record of the	e entire inte	est or their repre	sentative(s) a	are required. Submit	
	Total of	forms are submitted.	<u>.</u>				

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMENT UND	DER 37 CFR 3.73(b)
Applicant/Patent Owner: SmithKline Beecham Corporation	
Application No./Patent No.: To be assigned	Filed/Issue Date: Concurrently Herewith
Entitled: CHEMICAL COMPOUNDS	
, a	
(Name of Assignee) (Type of As	signee, e.g., corporation, partnership, university, government agency, etc.)
states that it is:	
1. the assignee of the entire right, title, and interest; or	
2. an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is	%
in the patent application/patent identified above by virtue of either:	
A. [/] An assignment from the inventor(s) of the patent application/patent id States Patent and Trademark Office at Reel015131, Frame	
OR	
B. [] A chain of title from the inventor(s), of the patent application/patent id	entified above, to the current assignee as shown below:
1. From: To: To: To: The document was recorded in the United States Patent and Trader Reel , Frame , or for which a contract the contrac	
The document was recorded in the United States Patent and Trader Reel , Frame , or for which a	nark Office at
3. From: To:	
The document was recorded in the United States Patent and Trader Reel , Frame , or for which a	
[] Additional documents in the chain of title are listed on a suppleme	ntal sheet.
[] Copies of assignments or other documents in the chain of title are attack [NOTE: A separate copy (<i>i.e.</i> , a true copy of the original assignment documents accordance with 37 CFR Part 3, if the assignment is to be rec	sument (s)) must be submitted to Assignment Division in orded in the records of the USPTO. See MPEP 302.08]
The undersigned (whose title is supplied below) is authorized to act on beha	
Signature	December 13, 2005 Date
Signature Frank P. Grassler	(919) 483-2482
Printed or Typed Name	Telephone number
Attorney for SmithKline Beecham Corporation	,
Title	

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETE D FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Power of Attorney

BY THIS POWER OF ATTORNEY given this 23rd day of February two thousand and five SMITHKLINE BEECHAM CORPORATION, a company incorporated in Pennsylvania (Registration No. 3330395) and having its registered office at One Franklin Plaza, P.O. Box 7929, Philadelphia, Pennsylvania 19101, United States of America, (hereinafter called "the Company"), HEREBY appoints all and any of its Directors, Secretary and Assistant Secretary for the time being, and DAVID ROBERTS, PETER JOHN GIDDINGS, ARTHUR WILLIAM RUSSELL TYRRELL, HUGH BAINFORDE DAWSON, WENDY ANNE FILLER, MICHAEL JOHN STOTT, PETER I. DOLTON, HELEN KAYE QUILLIN, MARCUS JONATHAN WILLIAM DALTON, CHARLES M. KINZIG, STEPHEN VENETIANER, THEODORE R. FURMAN, MARY E. McCARTHY, EDWARD R. GIMMI. CHARLES EDWARD DADSWELL, ROBERT H. BRINK, and FRANK P. GRASSLER jointly and severally to be its true and lawful agents and attorneys (hereinafter called "the Attorneys") on behalf and in the name of the Company or otherwise to do, perform, exercise or execute or concur with any other person or persons in doing, performing or exercising in or for any country or countries or jurisdiction in any part of the world all or any of the following powers, acts, deeds and things in connection with: letters patent, including extensions thereto; utility models; copyrights; trademark registrations; trademarks; trade names; trade dress; logos; design rights; designs and all rights analogous thereto and all applications therefor and any other forms whatsoever of intellectual property rights; including know-how, all of which are hereinafter called "Intellectual Property Rights", that is to say:

- In any country or countries or jurisdiction in any part of the world to make application or cause application to be made for the grant or issue or transfer to the Company or registration in its name of Intellectual Property Rights and to take all steps necessary for the same to be prosecuted, maintained, withdrawn, renewed, enforced, defended or extended.
- 2. As the act and deed of the Company to sign, seal, deliver and execute all or any assignments or assurances, licences to the Company of or under any Intellectual Property Rights or the right to and interest in any inventions to be the subject of Intellectual Property Rights for the purpose of fully and effectually vesting and transferring the same in and to the Company.
- 3. As the act and deed of the Company to sign and execute all or any assignments and acceptances of the transfer or assignment of such rights, and also any licences, sublicences and consents from the Company of or under any Intellectual Property Rights or the right to and interest in any invention to be the subject of Intellectual Property Rights, for the purpose of fully and effectually vesting transferring or granting the same in and to any entity, whether in the United Kingdom or elsewhere, in so far as such documents can be executed without the Company's seal being affixed thereto. For purposes of this Power of Attorney, the terms "entity" means, and includes, any person, firm or company or group of persons or unincorporated body.
- 4. To give undertakings or assurances to third parties and to any Trademark Registry or official intellectual property agency or governmental department or otherwise responsible for the registration or protection of trademarks, trade names, trade dress, logos, design rights or designs for the purpose of best protecting or ensuring the coexistence of the Company's rights to trademarks, trade names, trade dress, logos, design rights or designs.
- 5. To commence, prosecute and defend any proceedings or applications whether judicial or extra judicial relating to Intellectual Property Rights and to maintain, withdraw or settle the same.

- 6. For and in connection with any Intellectual Property Rights to sign, seal, deliver and execute any Power of Attorney or other deed or document authorising any agent, including trademark and patent agents and attorneys, to act on behalf of the Company.
- 7. To apply for the registration, amendment or cancellation of user rights in respect of any trademark or trade name.
- 8: To act in regard to all official communications which may now or hereafter be addressed to the Attorneys relating to Intellectual Property Rights or the renewal thereof in such manner that the Attorneys may be recognised as the authorised agent(s) of the Company in all proceedings in relation thereto.
- 9. For all or any of the purposes contained herein as the act and deed of the Company to sign, seal, deliver, execute and do all such documents, deeds, agreements, instruments and to do such acts as shall be requisite or may be deemed proper for or in relation to the said purposes.
- 10. This Power of Attorney shall expire on December 31, 2006

AND THE COMPANY HEREBY RATIFIES and confirms and agrees to ratify and confirm all and whatsoever the Attorneys or any person, persons, firm or company appointed by them shall lawfully do or have done by virtue of the authorities herein contained

AND THE COMPANY HEREBY DECLARES that all instruments executed under and by virtue of this Power shall be as valid and effectual as if sealed by the Common Seal of the Company.

IN WITNESS whereof SMITHKLINE BEECHAM CORPORATION has caused its Common Seal to be hereunto affixed the day and year first before written

The COMMON SEAL of SMITHKLINE BEECHAM CORPORATION was hereto affixed in the presence of:

Donald F. Parman

Vice President and Secretary